II.

Case of Premature Delivery. By O. W. Bartley, M. D. Bristol.

If the following case of premature delivery does not possess the interest of originality; yet, as an additional evidence of the advantages to be derived from the practice in circumstances of distortion, or contracted dimensions of the pelvis, precluding the possibility of extracting the fœtus alive, it may not be without its use. The preservation of life is itself a great desideratum: and as premature delivery may be conducted with

facility and safety, it should certainly be resorted to when existing circumstances indicate its expediency.

The subject of this relation, a woman by the name of Clifford, required my assistance in a tedious labour. It was represented that she had been long ineffectually suffering severe pains. When I arrived, the figure of the patient attracted my attention, and presented me a strong conviction of the existing cause of her suffering. Her size was diminutive; she had a limping gait, indicating a distortion of the spine; and her age appeared about forty. On examination per vaginam, I discovered there were not more than two inches and a half, in space, between the pubis and the sacrum; the upper part of which, with some of the lower vertebræ, projected inward, and the head of the fœtus was then resting on the projection at the upper aperture of the pelvis. On inquiry, I learned that this was the second time of her being pregnant. In the former instance, premature labour had occurred spontaneously at the end of six months, when she was delivered, without much difficulty, of a child which lived a few hours. Reflecting on this circumstance, and as the pains were strong, and the power of the patient not much diminished, I deemed it adviseable to wait for the efforts of Nature to effect her deliverance. Then administering an opiate, and desiring she might be kept quiet, in a recumbent posture, I left her. About twelve hours after, I was again summoned. The pains were very frequent, and more violent; her pulse weak, and her countenance indicating great distress and anxiety: the head of the child was precisely in the same position, without the least advancement from the time I quitted her. I resolved on immediate extraction; and to this end introduced the perforator through the sagittal suture; and by means of the crotchet, after having evacuated the head of its contents, I succeeded in extricating the child; but not before bringing away a considerable portion of the parietal bones, which yielded to the pressure of the instrument. The woman recovered in due time.

About a year afterwards I was again required to attend her. I found her in similar distressing circumstances, the head of the fœtus obstructed by the projecting bones, and the pains of labour were, as before, inefficient. I again resorted to the like means: but in the employment of these I experienced much greater difficulty than before. Having perforated the cranium, and lessened the volume of the head by discharging its contents, I could find no point of resistance to the crotchet or blunt hook; the parietal, the temporal, the frontal and occipital bones gave way, without in the least forwarding the progress of delivery. Almost exhausted by these unavailing efforts, and my fingers being painfully cramped with continued contraction,

I was obliged, for a time, to desist from the attempt. At last I succeeded to the attainment of my object, by contriving to fix a blunt hook upon the ox maxillare inferius; which, after inconceivable trouble, effected the delivery. The woman recovered in less time than the preceding.

In the succeeding year the claim for my assistance was renewed; but being at that time so much indisposed as to render me incapable of affording it, I substituted a professional friend, who experienced as many difficulties in the undertaking as had heretofore attended me.

At this time the woman's recovery was very doubtful, as great exhaustion had supervened.

The subsequent year the woman herself called on me in the early state of gestation to request my opinion. When contemplating the hazard of a repetition of the expedients employed in all the preceding labours, as regarding herself; and feeling, as I do, an invincible repugnance to the destruction of life, even when such a proceeding is absolutely requisite, I strenuously advised her to submit to premature delivery; and desired her to send for me soon after the period of seven months had elapsed. She acceded to this, and at the time proposed I received the intimation.

After the operation I directed her to repose, avoiding any considerable exertion; and when she felt the pains of labour, to send for me without delay. This happened about noon. The next day, in the evening, a messenger arrived, and I immediately hastened to the place, two miles distant; but before my arrival, the pains had expelled a child, which lived three years, when it was cut off by a contagious disease. The woman has had no child since; her husband having, previously to her last accouchement, enlisted as a soldier, and has not yet returned.

The old women in the neighbourhood of the patient, shocked at my impiety, held up my practice to general execration, lifting up their hands and eyes, and declaring they would rather suffer death, than submit to what I suppose they considered as a violation of the Law of Nature: not so the good woman; she unfeignedly exulted in her happy exemption from so severe a trial*.

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* The general execration of Dr. Bartley's practice, by a certain class in society, enforces the propriety of Dr. Denman's axiom, "that premature delivery should never be adopted on the opinion of a single individual." In the case above related, the propriety and necessity of adopting the practice was never more strongly proved; but yet the general feeling respecting it, had any untoward circumstances arisen, might have been greatly injurious to an honourable and skilful practitioner, the hazard of which would have been avoided by a consultation.—Editors.